

CHESTER J. CULVER
GOVERNOR

PATTY JUDGE
LT. GOVERNOR

DEAN A. LERNER, DIRECTOR

November 17, 2008

Mr. Steven Colerich, Administrator
Springvale Assisted Living
1050 15th Street North
Humboldt, IA 50548

RE: Recertification Monitoring Evaluation Report, Springvale Assisted Living, Humboldt, IA

Dear Mr. Colerich:

Enclosed is the **Final Recertification Monitoring Evaluation Report** completed by the Department of Inspections and Appeals (DIA) pursuant to the Code of Iowa Chapter 231C and the Iowa Administrative Code Chapter 25. **No Regulatory Insufficiencies were found during this evaluation.**

The review of the recertification documents you submitted has been completed and are accepted. In addition, the State Fire Marshal's (SFM) inspection report has been received as well as the Facility Engineer's approval of the Evacuation Plans for your program.

Enclosed you will find the Assisted Living Program Certificate **#S0203** with effective dates of **December 13, 2008** through **December 12, 2010**. This certificate must be posted in the building for public viewing.

If you have any questions regarding this certification, please contact me at 515-281-5721.

Sincerely,



Tamara Halvorson
ASB Lead Certification Coordinator
Adult Services Bureau

Enclosure

**Iowa Department of Inspections and Appeals
Assisted Living Program
Final Recertification Monitoring Evaluation Report**

Assisted Living Program:

Steven R. Colerich, Administrator
Springvale Assisted Living
1050 15th Street North
Humboldt, IA 50548

Date of Monitoring Visit:

November 5, 2008

Monitor(s):

Michael Streepy, RN

Definitions:

The following definitions are relevant:

Regulatory Insufficiency - A violation of a statutory or rule provision within the Iowa Code or Iowa Administrative Code (IAC) governing assisted living programs. A regulatory insufficiency requires a plan of correction to be presented to, and approved by, the Department of Inspections and Appeals (DIA).

Plan of Correction - A written response to one or more regulatory insufficiencies that are rule violations [321 IAC 25.8(3)]. The plan should identify how, and by a specific date, an insufficiency will be corrected. The plan is due to DIA within ten (10) working days of the program's receipt of a Recertification Monitoring Evaluation Report. Depending on the circumstances, DIA may revisit the assisted living program to confirm progress in fulfilling a plan's corrective measures.

Dementia-specific assisted living program - An assisted living program certified under this chapter that either serves five or more tenants with dementia or cognitive disorder staged between 4 and 7 on the Global Deterioration Scale or holds itself out as providing specialized care for persons with cognitive disorder or dementia, such as Alzheimer's disease, in a dedicated setting.

Overview:

An on-site monitoring evaluation was conducted at Springvale Assisted Living on November 5, 2008. In preparing this report, the following information was considered:

Current Program Census:

General Population Program (GPP)* – A program that is not a Dementia Specific program, but may have tenants with cognitive disorder.

Current number of tenants without cognitive disorder:	15
Current number of tenants with cognitive disorder:	1
Total Population:	16

Dementia Specific Program (DSP) – Not applicable.

***These are the census numbers represented by the program to be applicable at the time of the on-site.**

Tenant/Family Satisfaction Results – A community meeting was held with 11 tenants. Tenants stated the living environment is fine with no concerns. The staff is very good and very helpful with response to requests for assistance taking only 1 to 2 minutes. The food is good with too much being provided. Tenants feel activities are fine with enough offered. Tenants feel safe in the program and participate in fire drill and have knowledge of the fire exits. Tenants feel they are receiving services as expected in the occupancy agreements and are aware of the limitations. Tenants make their own decisions and come and go with no restrictions. Tenants stated medical services are very good with staff responding and either the physician notified or transport to the hospital next door. Tenants are generally satisfied with the program and would recommend it to friends and family members.

Program History – There were no substantiated regulatory insufficiencies found during this certification period.

On-Site Monitoring Evaluation – The monitor(s) made the observations detailed in the following areas. At the time of the monitoring visit the program was found to be in substantial compliance with the regulations.

Dated this 6th day of November, 2008.